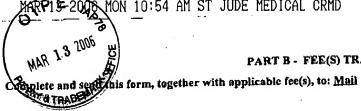
MON 10:54 AM ST JUDE MEDICAL CRMD



## PART B - FEE(S) TRANSMITTAL

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or manimission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) 01/20/2006 24473 7590 Certificate of Mailing or Transmission

STEVEN M MITCHELL PACESETTER INC 701 EAST EVELYN AVENUE SUNNYVALE, CA 94086 03/14/2006 TBESHAH2 00000058 220265 10828897

1400.00 DA 01 FC:1501

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. ESTHER CAMPBELL

(Signature (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/828,897	04/20/2004	Michael Paris	A04P3006-US1	6172

TITLE OF INVENTION: METHODS AND DEVICES FOR DETERMINING HEART RATE RECOVERY

		regim see		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUS
APPLN. TYPE	SMALL ENTITY	ISSUE PEB				04/20/2006
nonprovisional	NO	\$1400		\$0	\$1400 04/20/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS	}	
REIDEL, JESSICA L		3766		600-\$19000		
CFR 1,363).  Change of correspon Address form PTO/SB/ "Fee Address" indic PTO/SB/47; Rev 03-02 Number is required.	ce address or indication of "F indence address (or Change of 122) attached. ation (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E ss an assigned is identified 3.3 CEP 3.11 Completion	Correspondence ation form e of a Customer	(1) the na or agents (2) the na registered 2 registered listed, no	ating on the patent front page, limes of up to 3 registered pater OR, alternatively, me of a single firm (having as attorney or agent) and the named patent attorneys or agents. If name will be printed.  T (print or type)  Dear on the patent. If an assignment.	a member a 2 anes of up to no name is 3	
(A) NAME OF ASSIGN	nee Jetter, Inc	(B) R	RESIDEN	CB: (CITY and STATE OR CO SUNHYVALE (	untry) California	•
Please check the appropria	to assignce category or categ	ories (will not be printe	ed on the	pateut): 🗖 Individual 💢C	Corporation or other private (	roup entity La Governme
4a. The following fee(s) as M. Lesme Fee  Publication Fee (No.		4b. P	byment of A check Devmen	Fec(s): in the amount of the fee(s) is estable card. Form PTO-203 rector is hereby authorized by count Number 22 - 0265	nclosed. 8 is attached.	
O a Amplianas alaime	ns (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.	) b. Appli	cant is no longer claiming SMA	ALL ENTITY stams. See 37	CFR 1.27(g)(2).
The Director of the USPT	O is requested to apply the Ist Publication Pee (if required) peords of the United States Pa	sue Fee and Publication	n Pee (if a rom anyon ffice.	ny) or to re-apply any previous se other than the applicant; a re-	sly paid issue fee to the appli gistered attorney or agent; or	cation identified above. the assignee or other party
Authorized Signature	Jun IV			Date Registratio	3/13/06 n No. 31 857	
Typed or printed name	STEVEN M.	MHCHELL				and but the CISPTO to omcor

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.314. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Putents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PAGE 2/2 \* RCVD AT 3/13/2006 1:58:01 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-5/5 \* DNIS:2732885 \* CSID:4087380285 \* DURATION (mm-ss):01-26



## ST. JUDE MEDICAL

## Cardiac Rhythm Management Division 701 East Evelyn Avenue Sunnyvale, Calfiornia 94086

## FACSIMILE COVER SHEET

Deliver to:  Application No.:  Docket No.:  From:	USPTO Mailstop Issue Fee 10/828,897 A04P3006-US1 Esther Campbell (408) 522-6181	Date: Fax No.: Filing Da	: ate:	March 6, 2006 571-273-2885 April 20, 2004 luding cover sheet: 2	
Amendment Transmittal/I Appeal Brief Application:  Assignment Sheet (	f Facsimile & POA ( pgs) sheets, figures		lotice of letition Reques RCE) Reply B Reques 22(b)(3 Reques Honpub Respon Fermina	bee Transmittal of Appeal for: it for Continued Examination  Brief ( pgs) it & Certification Under 35 USC 2)(B)(i) it to Rescind Previous olication Request ise to Written Opinion ( pgs) al Disclaimer ital of Publication Fee Due ital Letter	
Liberahy certify that th	CERTIFICATE OF MAILING/This correspondence is being transand Trademark Office at fax no.	smitted by f	facsimik 2885.	17 CFR 1.8A) e on the date shown below to the   3 3/8/06 Date	

Confidentiality Note: The documents accompanying this facsimile transmission contain information from St. Jude Medical CRMD which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

If you do not receive all the pages, or if there is any difficulty in receiving, please call: (408) 522-6181 and ask for Esther Campbell.